SecondLook Digital for Philips CR

Labeling and User Manual

For Use Outside The USA

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1 Overview of Manual

This manual describes the SecondLook Digital Computer-Aided Detection (CAD) system and provides training to radiologists using the SecondLook® Digital system for breast cancer detection.

- Section 2 provides SecondLook device labeling.
- Section 3 describes how a radiologist should use SecondLook Digital.
- Section 4 provides a sample case to familiarize the radiologist with SecondLook Digital.
- Section 5 provides a summary of the radiologist use of SecondLook Digital.
- Section 6 provides a list of clinical references.

2 SecondLook Digital Device Labeling

2.1 Indications for Use

The SecondLook Computer-Aided Detection (CAD) system for mammography is intended to identify and mark regions of interest on screening and diagnostic mammograms from Philips PCR mammography systems to bring them to the attention of the radiologist after an initial reading has been completed. Thus the system prompts the radiologist to areas on Philips mammograms for second review only.

2.2 Brief Device Description

SecondLook is a mammographic CAD system that prompts radiologists to areas on Philips mammograms for a second review only. The CAD algorithm version 7.2 includes image processing feature computations, and pattern recognition technology to detect regions of interest. The algorithm was originally trained on digitized film-screen mammograms and intended to more specifically identify potential breast lesions appearing as clusters of microcalcifications and/or masses. The CAD system was adapted to run on Philips images, but the CAD algorithm design remained unchanged, and was not otherwise retrained on the Philips mammograms.

For hardcopy reading, the SecondLook output can be presented on a paper printout showing the CAD marks within the mammogram.

How to Use the CAD:

SecondLook with the Philips PCR system is intended to be used by a radiologist as follows: The radiologist must always first perform a full conventional read of the mammogram, and only after completing the conventional read, the radiologist may choose to display the CAD marks which may prompt to areas that were or were not examined during the first read. It is crucial to understand that 99.6% of all CAD marks will be placed over areas that are normal breast tissue or benign findings. Be aware that the SecondLook is not a diagnostic device, as the CAD marks are intended to be used to assist only in detection and not to assist with interpretation.

2.3 Warnings

Warnings: Radiological Interpretation

- The radiologist must always first perform a full conventional read of the mammogram, and only after completing the conventional read, the radiologist may choose to display the CAD marks which may prompt to areas that were or were not examined during the first read.
- The presence or absence of a CAD mark should not in any manner influence your diagnostic decision as to the nature of a mammographic finding, i.e. normal vs. benign vs. malignant, or the clinical action to be taken (e.g. additional imaging or biopsy).
- Do not rely on the size (or shape) of the CAD mark as it may not be representative of the actual extent (or shape) of the breast lesion.
- Upon re-evaluation for the original mammogram at the locations indicated by SecondLook, the radiologist must use their interpretative skills to determine if the area should be worked-up based on its mammographic appearance.
- SecondLook is neither designed nor intended to prompt to:
    - interval change(s) between mammographic exams
    - asymmetry between the left and right breast
    - tubular density/solitary dilated duct
    - skin thickening, or
    - nipple retraction.

Warnings: System Operation

- Do not use SecondLook if you suspect any electrical component is defective or inoperable

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- Do not place liquids on or near SecondLook. If a liquid is accidentally spilled on electrical components, immediately turn off the system to prevent any potential electrical shock. Contact iCAD Inc. at 1-937-431-1464, option #1 for further instructions

- Ensure that the system is connected to a properly wired and grounded power receptacle.

- Ensure that the voltage and current requirements are within system specifications to avoid bodily injury from electrical shock or fire hazard.

Warnings: Installation and Maintenance

- EMC Warning – This SecondLook system has been tested and found to comply with IEC 60950-1, EN 55022 and EN 55024. This system generates, uses and can radiate radio frequency energy and, if not installed and used in accordance with our installation instructions, may cause or be subject to harmful interference with other devices in the vicinity. If the SecondLook system appears to cause or be subject to harmful interference, try the following steps to correct the problem:

    - Reorient or relocate the SecondLook system or the interface device.
    - Increase the separation between the SecondLook system and the interfering device.
    - Plug the SecondLook system into an outlet on a different circuit from the interfering device.
    - Contact iCAD Inc. at 1-937-431-1464, option #1 for further instructions.

- Temperature and Humidity Warning – SecondLook system operations must be performed within the following temperature and humidity ranges.

    - Temperature: 50°-95° Fahrenheit (10°-35° Celsius)
    - Humidity: 20-80%

2.4 Precautions

Precautions: System Operation

- To prevent damage to the system, maintain equipment in a well-ventilated, air-conditioned environment.
- To minimize false positive CAD marks, ensure the CR plates are free of dust and debris.

- Effectiveness and safety in patients with breast implants has not been established for views that include the implant. When implant-displaced views are analyzed by the system, any resulting CAD marks should not be used by the radiologist in evaluating the patient.
- Effectiveness and safety has been established using all full breast mammographic views, including craniocaudal (CC), mediolateral oblique (MLO), exaggerated craniocaudal (XCC), exaggerated craniocaudal rotated laterally (XCCL), exaggerated craniocaudal rotated medially (XCCM), mediolateral (ML), lateromedial (LM), lateromedial oblique (LMO) and from below (FB).
- Effectiveness and safety have not been established using magnification and spot compression views. When these views are analyzed by the system, any resulting CAD marks should not be used by the radiologist in evaluating the patient.
- CAD analysis is performed on images both individually and at a case-based level. Consequently, the number of CAD marks on a specific image can vary depending upon the number of images included in the study when CAD analysis is performed.

Precautions: Installation and Maintenance

- This product contains no independently user serviceable parts. To prevent damage to the system, do not attempt to install or repair the SecondLook system. Only trained personnel are qualified to install or repair the system. For service training, contact the local Philips Representative or iCAD Inc. at 1-937-431-1464, option #1.
- Disconnect power cord before moving or servicing.

2.5 Adverse Effects

SecondLook may increase your false-positive rates for both screening and diagnostic mammography. Increased false-positives may lead to unnecessary additional imaging radiation exposure, biopsy, patient anxiety, etc.

2.6 Clinical Studies

Refer to the SecondLook Analog for further details regarding the testing studies used to support the safety and effectiveness of the original approval of the SecondLook analog device for use with digitized film-screen mammograms.

Benchmark testing

Benchmark testing consisted of a standalone analysis (i.e. analysis of the device without radiologist interaction) on a sample of CR mammograms[1] that is representative of a screening

population. Note that standalone performance testing of SecondLook version 7.2 on Philips images cannot be directly compared to standalone performance testing of SecondLook on digitized film screen images.

The benchmark testing did not measure the effect of the device on radiologist performance and cannot measure or predict any change in radiologist's cancer detection rates when using the device as intended.

Benchmark testing of the SecondLook version 7.2 with CR images provides a performance measure (i.e. sensitivity and average number of false positives per image or case) in the absence of any interaction with a radiologist. Standalone performance measures how often the CAD device places prompts over regions that contain or do not contain known breast abnormalities (i.e., microcalcifications and/or masses) in the absence of radiologist interaction.

Results of SecondLook benchmark testing are as follows:

- Overall sensitivity of SecondLook at the high operating point was 89% (95% CI 80% - 97%).
- Overall average false positive rate of SecondLook at the high operating point was 2.19 CAD marks per 4-view screening exam (95% CI 1.69 – 2.68).
- Overall sensitivity of SecondLook at the medium operating point was 89% (95% CI 80% - 97%).
- Overall average false positive rate of SecondLook at the medium operating point was 1.78 CAD marks per 4-view screening exam (95% CI 1.34 – 2.22).

1. Sample consisted of representative CR mammograms.

2.7 Detailed Device Description

SecondLook uses computer-aided detection (CAD) algorithms to identify regions of interest on mammograms that may contain suspicious finding. The CAD algorithms use advanced image processing, feature computations, and pattern recognition technology to analyze the images for potential areas of concern. These potential areas of concern are displayed for the radiologist by overlaying CAD marks at the appropriate locations of the mammography images within the softcopy review workstation or on a paper printout. The CAD marks are used by the radiologist as an additional tool in breast cancer detection.

An overview of the SecondLook CAD algorithms is shown in Figure 1.

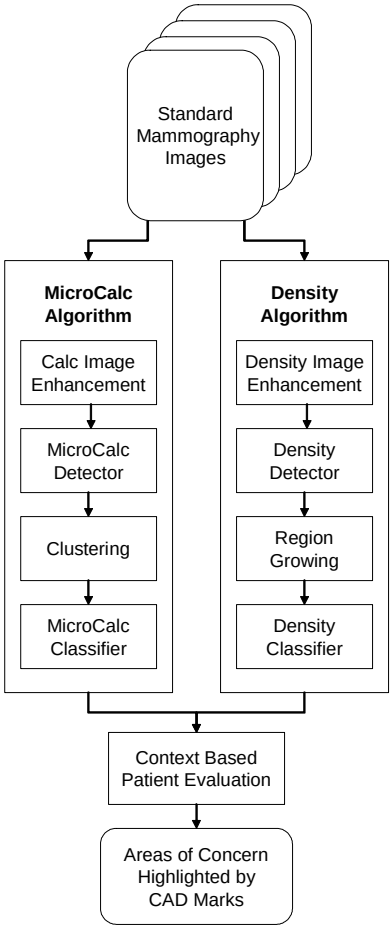

Figure 1: SecondLook CAD Algorithms Overview

The CAD algorithms begin with image enhancement of the digitized mammographic images to accentuate all areas that could be individual microcalcifications and densities. In the case of directly acquired images, the digital images are first transformed into images that resemble digitized film in order to accommodate variations in inter-pixel spacing, gray-level mapping and bit depth. It should be noted that the Modulation Transfer Function (MTF) for Philips images deviates from the MTF specified for SecondLook in the high frequency range. While the MTF is not directly used in the calculations performed by SecondLook, this deviation may impact the calculation of subtle features along the margins of lesions.

The microcalcification and density detectors then identify the areas that are most likely to be individual microcalcifications and densities, based on an initial analysis of morphological and intensity measurements. The types of densities detected are depicted in Figure 2 and include spiculated and non-spiculated masses, architectural distortions, and focal densities.

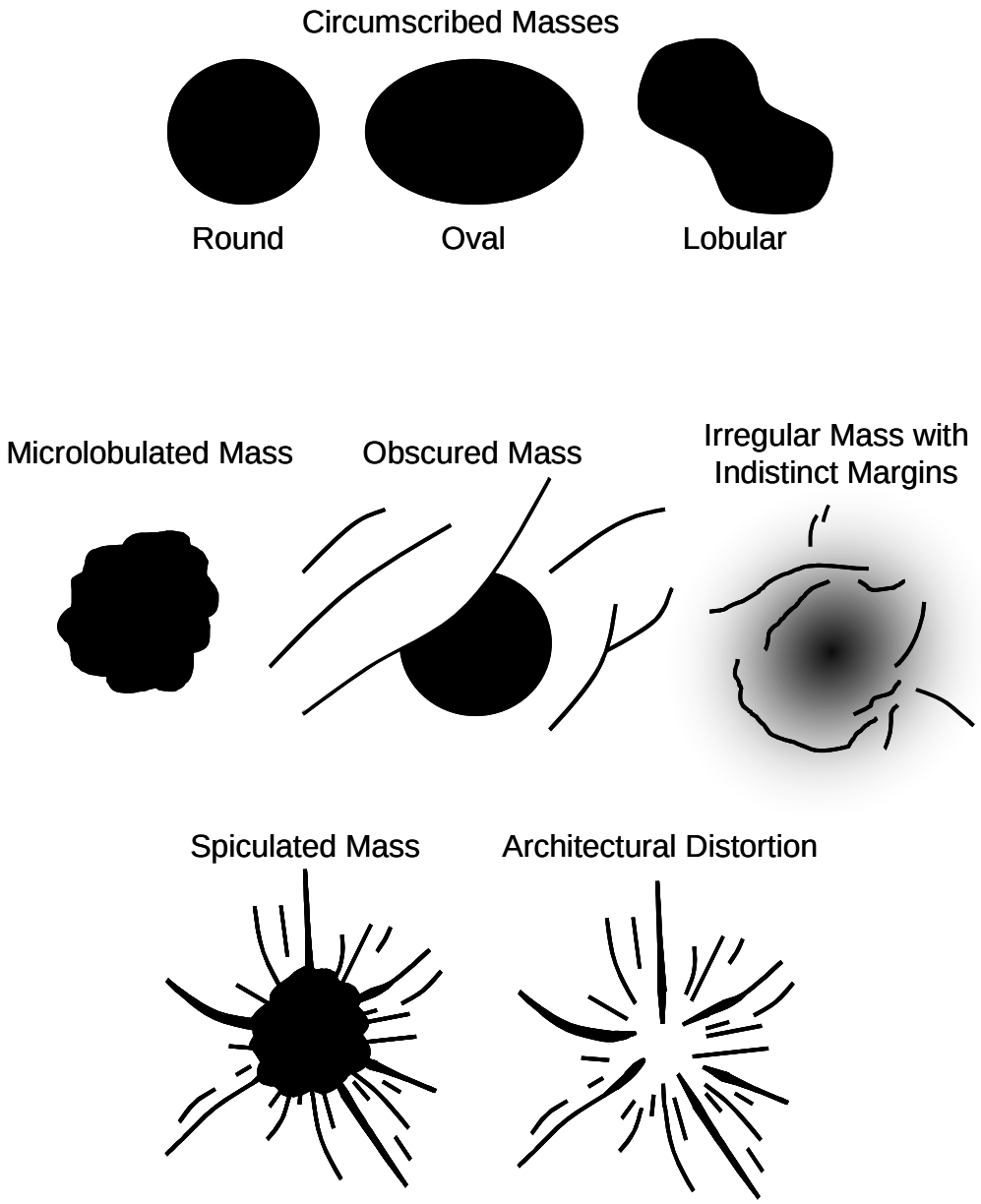

Figure 2: Densities Detected by SecondLook

Further analysis of detected areas is accomplished by clustering individual microcalcifications and region growing densities. Clusters include 3 or more individual microcalcifications that are each no more than 4.1 millimeters apart. Figure 3 depicts portions of three different mammography images showing how the SecondLook system would highlight microcalcifications clusters in these examples. These examples use CAD marks that are rectangular and

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correspond to the approximate size of the microcalcifications. Region growing determines the shape of potential densities as shown in Figure 4.

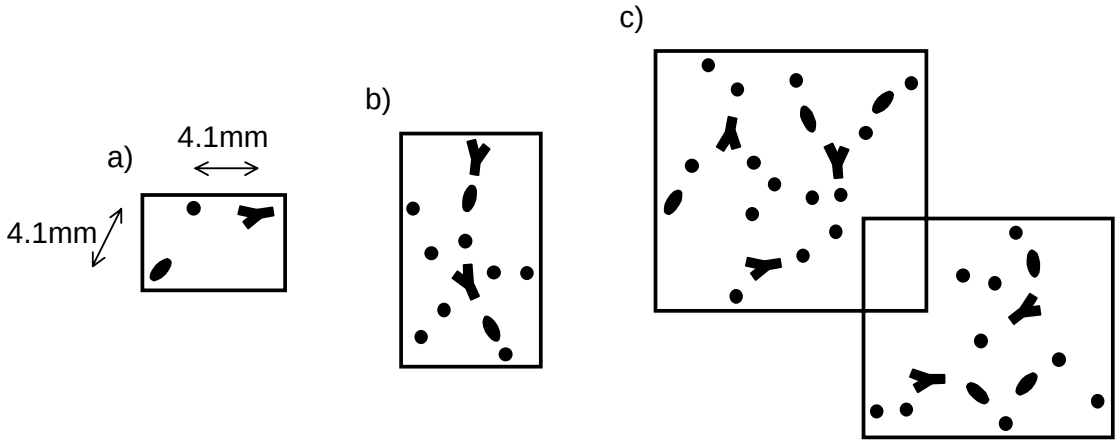

Figure 3: CalcMarks Highlighting Microcalcifications Clusters with:

(a) The minimum number of calcifications,
(b) The extent of the CalcMark enclosing all calcifications considered as part of the cluster,
(c) Overlapping CalcMarks are distinctly highlighted even when clusters are close to each other.

After clustering for microcalcifications analysis and region growing for density analysis, clinically relevant and mathematical features are then computed to describe each detected cluster of microcalcifications and density. For example, the variability in size and shape of the calcifications in a cluster are good features to describe clusters of microcalcifications. These features are used by microcalcifications and density classifiers, which are specifically designed to select the areas most likely to have features that may be seen with cancer.

Further analysis uses the context of all areas selected for the patient. For example, there is a maximum total number of SecondLook CAD marks each 4-image case can include. Simultaneous analysis of all areas of concern detected in the patient allows the locations most likely to be cancer to be highlighted by the CAD marks.

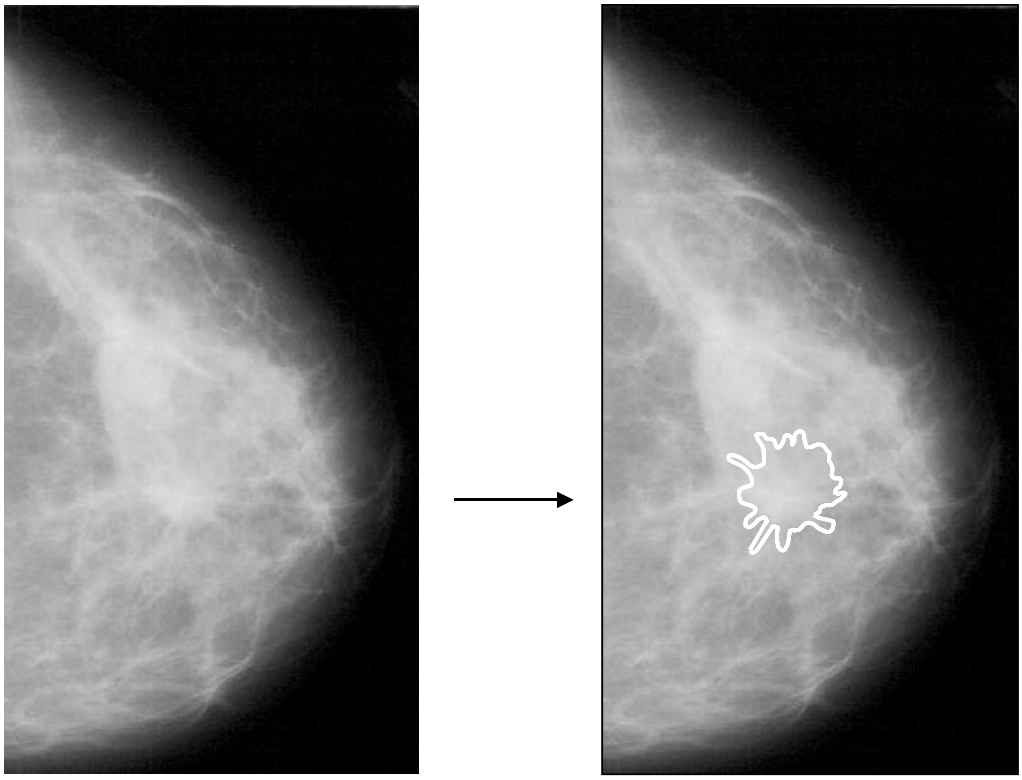

Figure 4: Region Growing to Determine Shape of Density

2.8 Conformance to Standards

Refer to the SecondLook Digital Service Manual for the CE Declaration of Conformity (DTB060).

2.9 How Supplied

The SecondLook system includes the following components: Computer.

The SecondLook Digital CAD server ships without anti-virus software. However, anti-virus software can be installed without voiding the warranty if iCAD's installation procedure is followed. This installation procedure is available at www.icadmed.com or through an authorized re-seller of iCAD products. iCAD has tested anti-virus software products from McAfee, Symantec and Norton and no issues have been reported. The current list of approved anti-virus software is available at www.icadmed.com.

On a semi-annual basis, iCAD tests patches to the Microsoft Operating System (OS) for compatibility with the SecondLook Digital CAD system. The current list of approved OS patches is available at www.icadmed.com or through an authorized re-seller of iCAD products.

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3 Radiologist Use of SecondLook® Digital

3.1 Radiologist Review Prior to Viewing CAD Marks

The radiologist first reviews the Philips mammograms without viewing the SecondLook Digital CAD marks, following her or his existing procedures of clinical practice. The radiologist will make an initial determination if a work-up is indicated for the patient prior to turning on and viewing the CAD marks with the softcopy review workstation.

3.2 Radiologist Review with CAD Marks

The radiologist turns on and views the SecondLook Digital CAD marks with the softcopy review workstation after determining whether or not a work-up is indicated from her or his initial review of the patient mammograms. The radiologist will take a "SecondLook" at the mammograms corresponding to any CAD marks. From this re-evaluation of the mammograms, the radiologist determines if any additional work-up is required. If there are no CAD marks, no re-evaluation of the mammograms is necessary. Work-up decisions are not based solely upon the CAD marks. All work-up decisions are based upon review of the mammograms, supporting clinical information, and CAD marks by the radiologist.

Areas of concern marked by SecondLook Digital include suspicious clusters of microcalcifications, spiculated and non-spiculated masses, architectural distortions, and focal asymmetric densities.

Below is the recommended case review process with SecondLook Digital:

1. Review patient history and evaluate Philips mammograms prior to turning on and viewing CAD marks with softcopy review workstation
2. Make initial interpretation
3. Turn on and view CAD marks with softcopy review workstation and identify potential areas of concern
4. Review mammograms, re-evaluating areas of concern highlighted by CAD marks with softcopy review workstation
5. Render decision

It is very important to remember that it is the radiologist who makes the final decision about a case. When a radiologist decides to work-up a case, the CAD marks must not change the decision; however, the CAD marks can identify locations for further work-up that were initially undetected by the radiologist.

Note: If the CAD algorithm fails to process, the review workstation will notify the user about the failure. Depending upon the review workstation configuration, this notification may differ. For example a large "X" may be displayed across the image when the user turns the CAD on.

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4 Radiologist Training with Sample Cases

4.1 Training Instructions

One sample case demonstrates the use of SecondLook Digital for the radiologist prior to clinical use. This case is intended to familiarize the radiologist with the procedures for using the SecondLook Digital CAD marks. The case review procedures are emphasized. Therefore, the training is accomplished by following the case presentation in Section 4.2 of this manual, without requiring use of the softcopy review station.

For the example case in the manual, the procedures for using SecondLook Digital CAD marks are demonstrated to the radiologist with the following steps:

1. The first page will provide the case history and printed versions of the Philips mammograms without CAD marks. During clinical use, the radiologist would first review the mammograms without viewing the CAD marks, following her or his existing procedures of clinical practice. The radiologist would make an initial determination if a work-up were indicated for the patient prior to turning on and viewing the CAD marks with the softcopy review workstation.

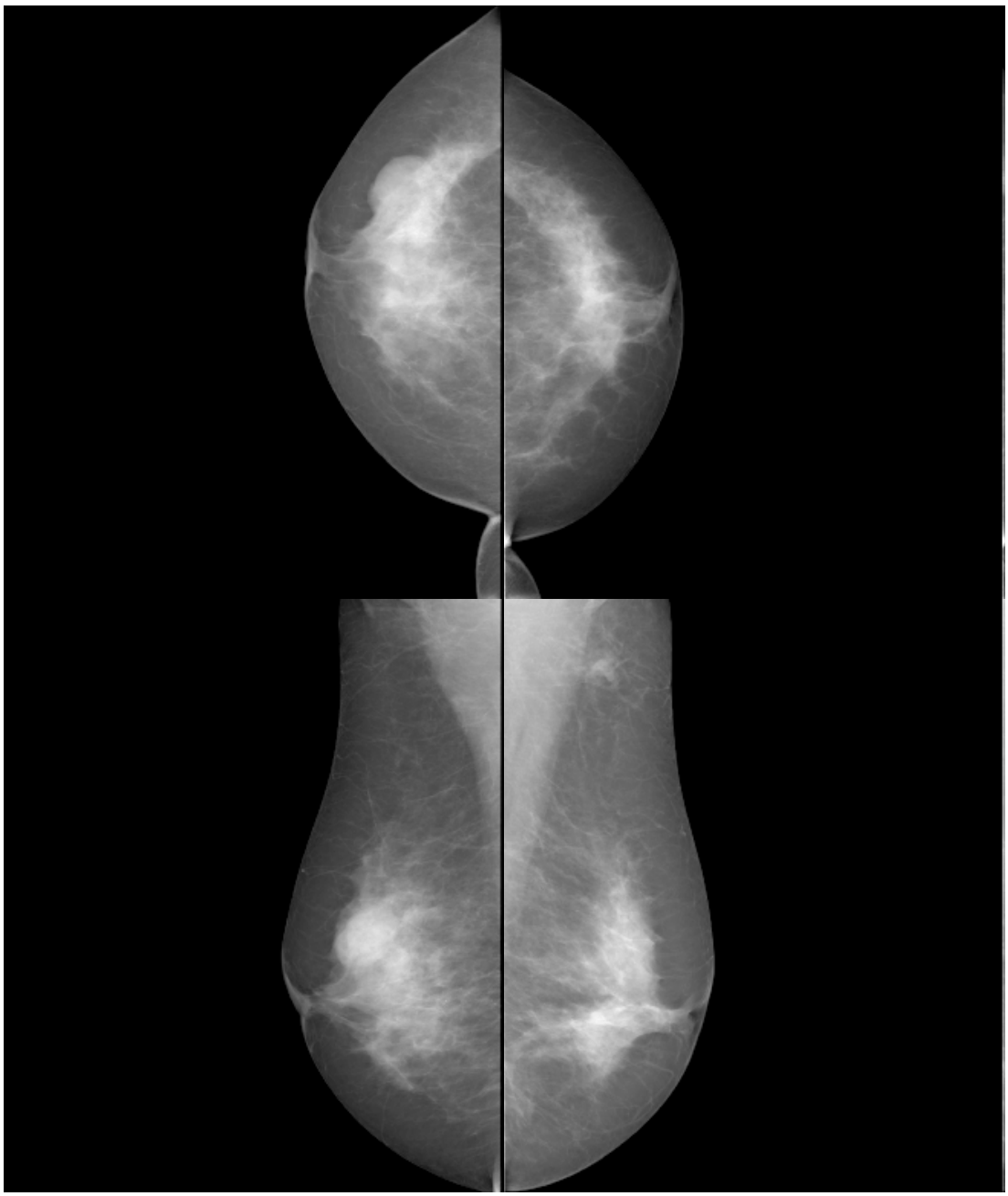
2. The second page contains printed versions of the mammograms with CAD marks turned on. During clinical use, the radiologist would take a “SecondLook” at the mammograms corresponding to any CAD marks. From this re-evaluation of the mammograms, the radiologist would determine if any additional work-up was required. If there were no CAD marks, no re-evaluation of the mammograms would be necessary. Work-up decisions are not based solely upon the CAD marks. All work-up decisions are based upon review of the mammograms, supporting clinical information, and CAD marks by the radiologist.

3. The third page then presents a summary of the case, which includes the case history, the mammographic findings, and the resulting pathology. An arrow points to the location of the tumor in printed versions of the mammograms.

4.2 Sample Case

Case History and Mammograms

History: 62 yo female with palpable mass in upper outer quadrant of right breast. No family history of breast cancer.



**** DURING CLINICAL USE, THE INITIAL MAMMOGRAPHY REVIEW AND ****
**** INITIAL WORK-UP DECISION WOULD BE ACCOMPLISHED ****

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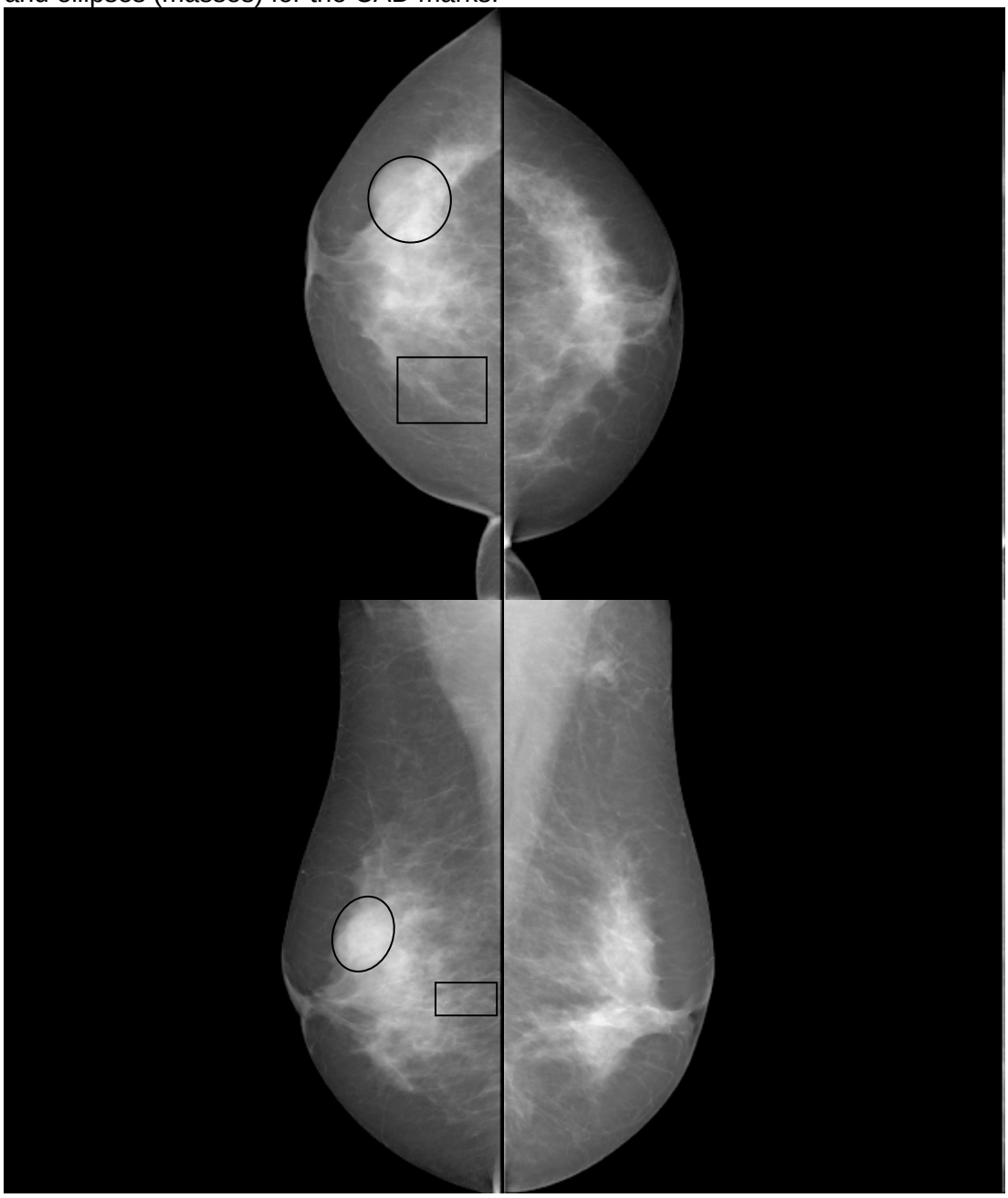
Mammograms with CAD Marks

Note: The softcopy review workstation may use symbols other than rectangles (calcifications) and ellipses (masses) for the CAD marks.



**** DURING CLINICAL USE, THE AREAS OF CONCERN HIGHLIGHTED BY ****
**** THE CAD MARKS WOULD BE RE-EVALUATED USING THE SOFTCOPY ****
**** REVIEW WORKSTATION. FROM THIS RE-EVALUATION OF THE ****
**** MAMMOGRAMS, THE RADIOLOGIST MAKES THE FINAL WORK-UP ****
**** DECISION. ****

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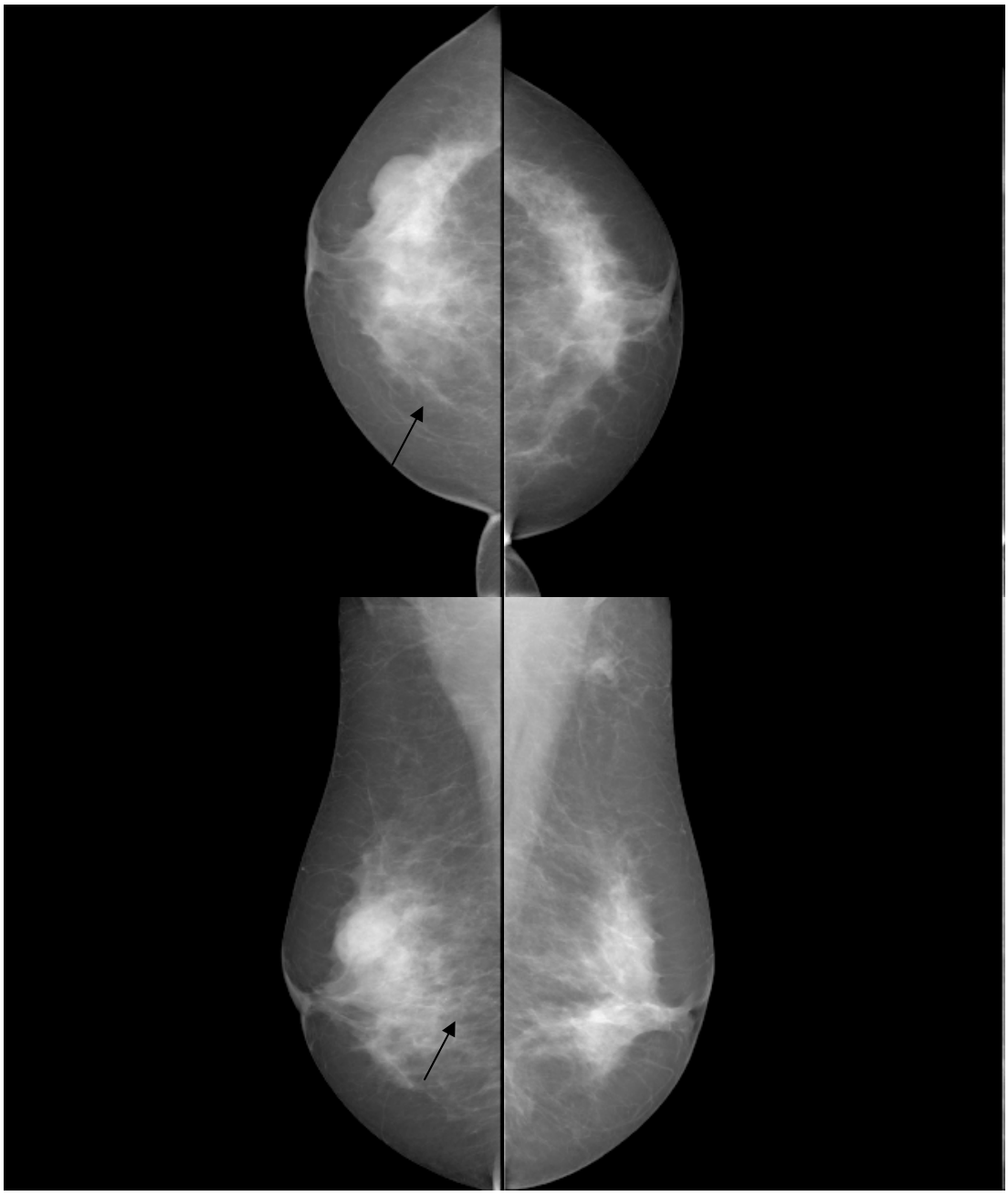
Case Summary

History: 62 yo female with palpable mass in upper outer quadrant of right breast. No family history of breast cancer.

Mammographic findings: 3 cm circumscribed mass with partially obscured borders in the right breast at 10 o'clock (shown to be a cyst on ultrasound). Linear distribution of pleomorphic calcifications in the right breast at 2 o'clock posteriorly.

Pathology: Ductal carcinoma in-situ (arrows show location).



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5 Summary of Radiologist use of SecondLook® Digital

The radiologist uses the SecondLook Digital CAD marks with mammography according to the following steps:

1) The radiologist first reviews the Philips mammograms without viewing the CAD marks, following her or his existing procedures of clinical practice. The radiologist will make an initial determination if a work-up is indicated for the patient prior to turning on and viewing the CAD marks with the softcopy review workstation.

2) The radiologist turns on and views the CAD marks with the softcopy review workstation after determining whether or not a work-up is indicated from her or his initial review of the patient mammograms.

3) The radiologist will take a “SecondLook” at the mammograms corresponding to any CAD marks. From this re-evaluation of the mammograms, the radiologist determines if any additional work-up is required. If there are no CAD marks, no re-evaluation of the mammograms is necessary. Work-up decisions are not based solely upon the CAD marks. All work-up decisions are based upon review of the mammograms, supporting clinical information, and CAD marks by the radiologist.

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